

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/775,756
	Filing Date	February 9, 2004
	Issued Patent No	6,986,343
	First Named Inventor	Martin Carnall Issued Jan. 17, 06
	Art Unit	3641
	Examiner Name	Troy Chambers
	Attorney Docket Number	S1011/20221 (Case no.347)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number:

OR

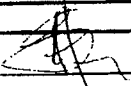
<input type="checkbox"/> Firm or Individual Name			
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	MICHAEL STEPHENSON		
Date	11 MAR 2004	Telephone	0244 76 372598

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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